

Work Order ID 106165

\*106165\*

Page 1

August-28-13 1:08:23 PM

Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Item Name: Aft Crosstube - High

Stop \*NS2\*

Start Date: 9/09/13 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-08-30 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D212-664-241	Rev D (DEO)
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DSI9563	B
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100

0.00

\*100\*

DC

DOCUMENT CONTROL

Memo

0.00

Document Control

Photocopy bluefile and create labels as per PPP D212-664-201 CHG006

DAS  
27  
9-89

13111

110

0.00

\*110\*

Packaging

Pick Kit  
Packaging

Memo

0.00

Packaging

Rm 13-10-04

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Work Order ID 106165

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**\*106165\***

Page 2

Item ID: D212-664-201

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Crosstube - High

Start Date: 9/09/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

**\*120\***

CNC Bend 2

CNC Alpha 160 Bender

BENDING MACHINE - CROSSTUBES

Memo

\*\*\*VERF SET-UP BEFORE BENDING BY: \*\*\*

Bend tube as per Dwg D212-664-241 using CNC bender program 212-aft

0.00

0.00

*Rm* 13-10-10

130

**\*130\***

QC

Quality Control

QC15- Crosstube Dimensional Check

Memo

0.00 DAS

16

9-89

0.00

13/10/23

*Pb*

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: AM Date: 13/11/14QA Closed: AM Date: 13/11/13

Work Order: <u>106165</u>  Part No. <u>D212-664 201</u>  NCR No. <u>13-3213</u>	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input checked="" type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input checked="" type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input checked="" type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data		13/10/17	120	1	CRUSHING IS OVER TOLERANCE    RC. Process	DAS 12 9-89  13/10/17	Acceptable.  Not <del>excess</del> critical in bending at this location. REF. attached S.I.R.	DAS 12 9-89  13/10/17	DAS 16 9-89  13/10/23	DAS 16 9-89  13/10/23
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process	X									
Supplier										
Training										
Unapproved										

## FAULT CATEGORY 2

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input checked="" type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route- <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 106165

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Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Aft Crosstube - High

Start Date: 9/09/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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140

0.00

\*140\*

Crosstubes

Crosstubes

Memo

0.00

Crosstubes

1-Drill pilot holes in tube as per Dwg D212-664-241 using drill Jig DT8550, DT8551, drill table DT8577 and locate tower holes #8 as per QSI0010.

2-Ream hole to finish size in tube as per Dwg D212-664-241 using drill Jig DT8550 &amp; DT8551. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.

3-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-241

4- \*\*\*WEAR LATEX GLOVES HANDLIND CROSSTUBE.\*\*\* Deburr &amp; Inspect for surface damage. Repair damage within limits as per Dwg D212-664-241

~~13-10-23~~

13-10-23

150

QC5- Inspect part completeness to step on W/O 0.00

\*150\*

QC

Quality Control

Memo

0.00

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

1

13-10-23

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Work Order ID 106165

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**\*106165\***

Page 4

Item ID: D212-664-201

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Item Name: Aft Crosstube - High

Stop **\*NS2\***

Start Date: 9/09/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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160

0.00

**\*160\***

HandFXtube

Memo

0.00

Hand/Finishing Crosstubes

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

1- CLEAN CROSSTUBE WITH WASH'N WIPE

*1* *13-10-24*

180

Outsource process - NDT per QSI038 4.1

0.00

**\*180\***

Outsource2

Memo

0.00

Outsource process - NDT

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

Liquid Penetrant Inspection as per QSI 038

Issue P/O: **21819**

LPI as per ASTM 1417 Level 2

Attach copy of NDT results to work order

*13-10-24*

190

Receive & Inspect for Damage & Mat'l Certs

0.00

**\*190\***

Packaging

Packaging

Memo

0.00

Packaging

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

Ensure copy of NDT results attached to work order.

*13/10/2013*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
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		<input type="checkbox"/> Part Incorrect
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		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



**Work Order ID 106165**

August-28-13 1:08:23 PM

**\*106165\***

Page 5

Item ID: D212-664-201

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Crosstube - High

Start Date: 9/09/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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200

QC5- Inspect part completeness to step on W/O

0.00

**\*200\***

QC

Memo

0.00

Quality Control

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

Inspect for damage &amp; ensure results are as per Dwg D212-664-241

1 13-10-25

204

Crosstubes Chemical Conversion

0.00

**\*204\***

HandF Xtube

Memo

0.00

Hand Finishing Crosstubes

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN  
CROSSTUBE BEFORE CHEMICAL CONVERSIONTRM 13-10-25

206

QC7-Inspect Chemical Conversion Coat

0.00

**\*206\***

QC

Memo

0.00

Quality Control

\*\*\*WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.\*\*\*

1 13-10-25

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

**Work Order ID 106165**

August-28-13 1:08:23 PM

**\*106165\***

Page 6

Item ID: D212-664-201

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Crosstube - High

Start Date: 9/09/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210	Spray Painting per QSI005 4.2	0.00							
<b>*210*</b>	SprayPaint								
Spray Painting	Memo	0.00							
	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								

1-Prime inside and outside crosstube as per QSI 005 4.2

PRIME BATCH: 126195Start Time: 11:00Finish Time: 11:50

\*\*\*MASK UNDERSIDE OF CROSSTUBE AS SHOWN ON DWG DEO\*\*\*

2-Paint outside crosstube with White Imron as per QSI 005 4.2

PAINT BATCH: 127155Start Time: 6:30Finish Time: 7:15

3- Remove masking and apply matte clear coat as per dwg DEO

CLEAR BATCH: 1265861 0 0 12  
13-10-27

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Grain	Ovalized	Pressure/Forced
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved	
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong	
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset		
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration		
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence		
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions		

# Work Order ID 106165

August-28-13 1:08:23 PM

**\*106165\***

Page 7

Item ID: D212-664-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Aft Crosstube - High  
 Start Date: 9/09/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 9/09/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220	QC14- Inspect Spray Paint	0.00							
<b>*220*</b>									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								
230		0.00							
<b>*230*</b>	Crosstubes								
Crosstubes	Memo	0.00							
	1-Abrade mating surfaces of support and crosstube with 180 grit sandpaper, clean the area with MEK or equivalent as per dwg								
	2-Install supports with Proseal 890 per D212-664-241 (DEO) and QSI 015								
	A/R Proseal 890 Batch: <u>126855</u>								
	EXP: <u>5/14</u>								
	3-Install supports clamps Using Dt9565 as per Dwg D212-664-241 (DEO), Torque to 80-100 IN-LBS.								
	PROSEAL CURE TIME 72 HOURS:								
	Start: <u>11:00</u>								
	Finish: <u>11:45</u>								

13-10-28

13-10-28

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
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<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Work Order ID 106165

August-28-13 1:08:23 PM

**\*106165\***

Page 8

Item ID: D212-664-201

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Item Name: Aft Crosstube - High

Stop **\*NS2\***

Start Date: 9/09/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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240	QC5- Inspect part completeness to step on W/O	0.00							
<b>*240*</b>									
QC	Memo	0.00							
Quality Control	***RE-CHECK TORCQUE ON CLAMP AFTER PROSEAL HAS CURED FOR 72HOURS AS PER DWG.***								

1 **DAS 05** 13/11/01

250	Pick Kit	0.00							
<b>*250*</b>									
Packaging	Memo	0.00							
Packaging									

**DAS 32 9-89** 13/11/01 (1)

260	QC4- 100% Inspect kits for completeness	0.00							
<b>*260*</b>									
QC	Memo	0.00							
Quality Control									

**DAS 27 9-89**  
13111

1

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
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<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
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		<input type="checkbox"/> Power Loss/Surge
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		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



August-28-13 1:08:23 PM

**\*106165\***

Page 9

**\*N900040100\***

Setup Start \*NS1\*

Stop \*NS2\*

**\* 1 \***

**Cust Item ID:**

**Required Date:** 9/09/13      **Req'd Qty:** 1.00

**\* 1 \***

**Customer:**

**Reference:**

Run Start \*NR1\*

**Approvals:**      **Process Plan:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tooling:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Stop \*NR2\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

**Insp.  
Stamp**

0.00

**\*270\***

### Packaging

0.00

### Packaging

## Memo

## Packaging

Identify and pack for shipping as per PPP D212-664-201

**DAS**  
**6**  
**9-89**

13/11/4

**DAS**  
**31**  
**9-89**

280

QC21- Final Inspection - Work Order Release

0.00

\*280\*

QC

## Memo

0.00

## Quality Control

Rm 13/11/07

MF  
13-11-04

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Picklist Print

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Work Order ID: 106165

\*106165\*

Parent Item: D212-664-201

\*D212-664-201\*

Parent Item Name: Aft Crosstube - High

Start Date: 9/09/13

Required Date: 9/09/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:E04.02.16ReformatK/DS  
 IPP Rev:F 06-03-29 Remove Coments on Pick List JLM  
 IPP Rev:G 07-04-30 As per Rev C JLM  
 IPP Rev:H 08-05-22 up date Qty of rubber cushion DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D212-664- 201TRNRevC		Manufactured	No			110	Each	0.0000	1	1			
-------------------------	--	--------------	----	--	--	-----	------	--------	---	---	--	--	--

\*D212-664-201TRNRevC\*

Crosstube Turning Detail

D3595-063-530		Manufactured	No			230	Each	186.0000	2	2			
---------------	--	--------------	----	--	--	-----	------	----------	---	---	--	--	--

\*D3595-063-530\*

Rubber Cushion

\*\*

\*\*

① Kon 13-10-04

AB 13-10-28

Location	Loc Qty	Loc Code
FG	5	
82656	5	
LG	20	
103099	20	
LG051	97	
63407	6	
67185	6	
70067	18	
72745	2	
75783	7	
79932	13	
82656	10	
87833	5	
90969	21	
99914	9	
ST414	64	
101880	4	
103949	60	

④

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

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Work Order ID: 106165

**\*106165\***

Parent Item: D212-664-201

**\*D212-664-201\***

Parent Item Name: Aft Crosstube - High

Start Date: 9/09/13

Required Date: 9/09/13

Start Qty: 1.00

Required Qty: 1.00

D2940-1      Manufactured      No      230      Each      42.0000      2      2

**\*D2940-1\***

Support

\*\*

*AS 13-10-28*

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
LG	2	
103115	2	
LG052	40	
100710	16	
103951	20	
71829	1	
90677	2	
93038	1	

MS21920-28      Purchased      No      230      Each      137.0000      4      4

**\*MS21920-28\***

Clamp

\*\*

*AS 13-10-28*

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
FG	5	
105884	5	
LG	1	
M125728	1	
LG050	120	
123674	10	
124505	4	
125351	8	
M126085	50	
M126292	48	
LG051	11	
121440	8	
123243	2	
124260	1	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

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Work Order ID: 106165

**\*106165\***

Parent Item: D212-664-201

**\*D212-664-201\***

Parent Item Name: Aft Crosstube - High

Start Date: 9/09/13

Required Date: 9/09/13

Start Qty: 1.00

Required Qty: 1.00

D3428-1 Manufactured No

250 Each

4.0000

\*\*  1

DAS  
32  
9-89

**\*D3428-1\***

Placard  
DAS  
27  
9-89

## Location

## Loc Qty

## Loc Code

ST045

4

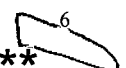
100704

4

MS21042L6 Purchased No

250 Each

353.0000

\*\*  6

DAS  
32  
9-89

**\*MS21042L6\***

Nut  
DAS  
27  
9-89

## Location

## Loc Qty

## Loc Code

ST314

353

123248

7

125535

146

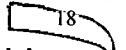
m126275

200

AN960JD616 NAS1149D0663J Purchased No

250 Each

0.0000

\*\*  18

DAS  
32  
9-89

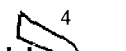
**\*AN960JD616\***

Washer  
DAS  
27  
9-89

AN6-40A Purchased No

250 Each

146.0000

\*\*  4

DAS  
32  
9-89

**\*AN6-40A\***

Bolt

## Location

## Loc Qty

## Loc Code

ST340

20

M126105

20

ST517a

126

124561

1

125388

75

M126010

50

DAS  
27  
9-89

13/11/01 (V)

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Shop Packet Print

Page 3

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							



# Picklist Print

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Work Order ID: 106165

**\*106165\***

Parent Item: D212-664-201

**\*D212-664-201\***

Parent Item Name: Aft Crosstube - High

Start Date: 9/09/13

Required Date: 9/09/13

Start Qty: 1.00

Required Qty: 1.00

AN6-41A

Purchased

No

250

Each

92.0000

2 2  
\*\*

M/27044

DAS  
32  
9-89

DAS  
32  
9-89

**\*AN6-41A\***  
Bolt

Location

Loc Qty

Loc Code

ST504

50

M126180

50

ST517

42

125388

42

DAS  
27  
9-89

13/01/07 (1)

*[Signature]*

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Shop Packet Print

Page 4

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

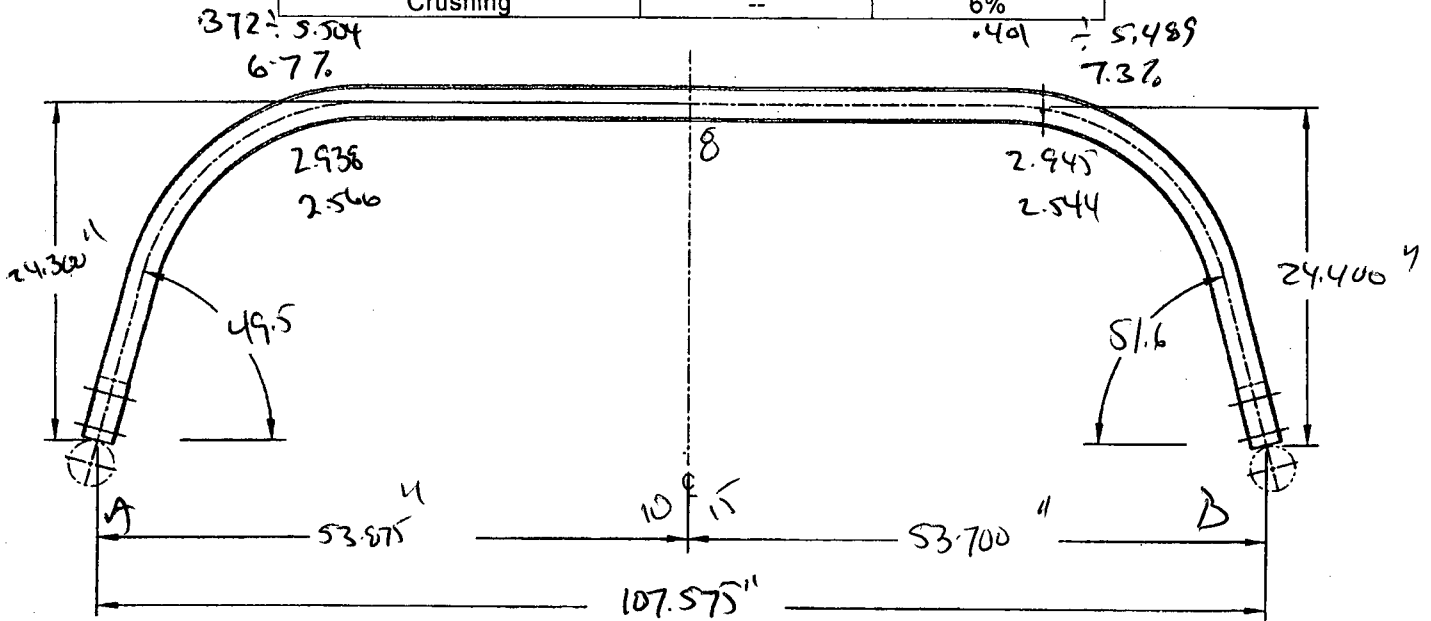
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order:	106165
Description: Crosstube High Aft (205/212)		Part Number:	D212-664-201
Inspection Dwg: D212-664-241 Rev: D		Page 1 of 1	

Required Dimension	Min	Max
Height	24.17	24.43
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.70
Bending Passes	5	--
Crushing	--	6%



	Side A	middle	Side B
Bending Passes	10	8	15
Crushing	6.77%		7.37%
Comments			
Side A: 6.77% crushing @ 10 Passes			
middle: 8 Passes			
Side B: 7.37% crushing @ 15 Passes			

QC15 Inspection	DAS
Date	16
	9-89 13/10/23

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	07.05.08	Dimensions updated per Dwg rev. C	KJ/JLM	
C	10.04.01	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing dimensions	KJ	

Item	Qty -241	Qty -241B	Part Number	Description
1	X		D212-664-241	CROSSTUBE ASSEMBLY (205/212 HIGH AFT)
2		X	D212-664-241B	CROSSTUBE ASSEMBLY (214 HIGH AFT)
3	1	1	D6006-129	CROSSTUBE
4	2	2	D2940-1	SUPPORT
5	4	4	D3595-063-530	RUBBER CUSHION
6	4	4	MS21920-28	CLAMP (OR MS21920-30)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

# **GENERAL NOTES:**

- 1) MATERIAL: MANUFACTURED FROM D6006-129  
FINISHED LENGTH = 124.362±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF  
USING VIBRATING STYLUS.
- 7) WEIGHT: D212-664-241 = 44.2 lbs (PER IIN-D212-664)  
D212-664-241B = 44.2 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 5 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-28 CLAMPS (OR -30) WITH D3595-063-530 RUBBER CUSHIONS TO SECURE THE D2940-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

D	REFORMAT/REVISE GENERAL NOTES/PART LIST; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD -241B (ZN D4-2, B4-2); REMOVED REF & ADD TOLERANCES (ZN D8-3 & C4-3, C6-3 & A8-3); RELOCATED FLAG #6 PER PAR 08-046 (ZN A8-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4	RF	09.09.30
C	REMOVE -1009 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATIBILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	PH	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	PH	DRAWING NO.	REV. D
MFG. APPR.	PH	D212-664-241	SHEET 1 OF 4
APPROVED	PH	TITLE	SCALE
DE APPR.	PH	CROSSTUBE ASS'Y (205/212 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

106165 MLS  
13-08-30

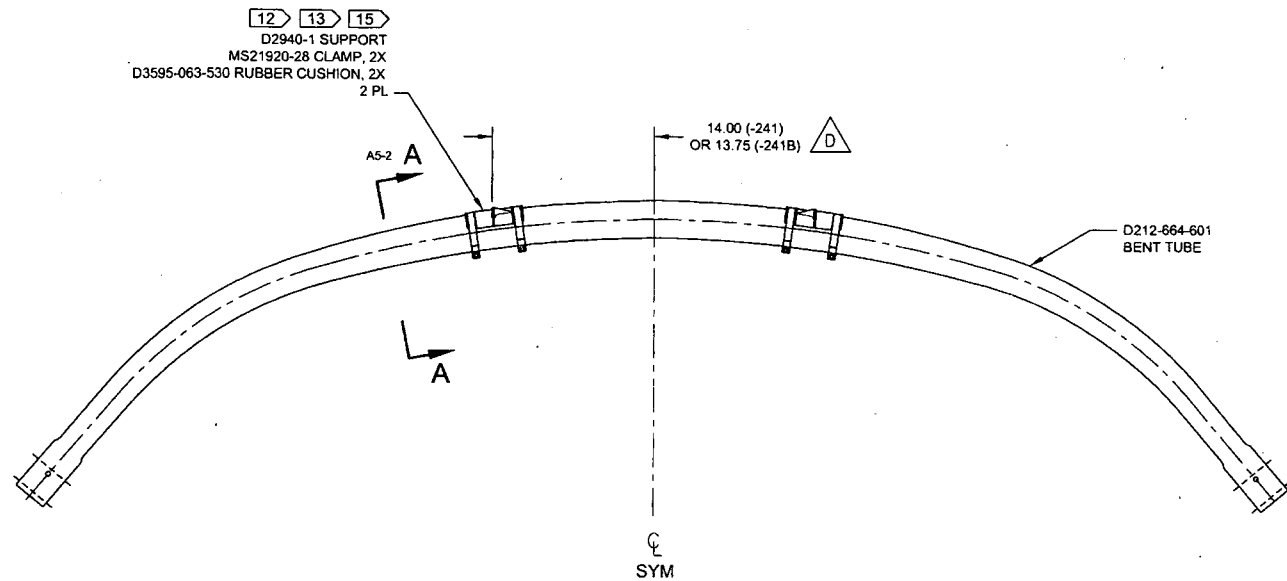
LOC #11-614  
11.08.25

UNDER REVIEW  
11.08.13

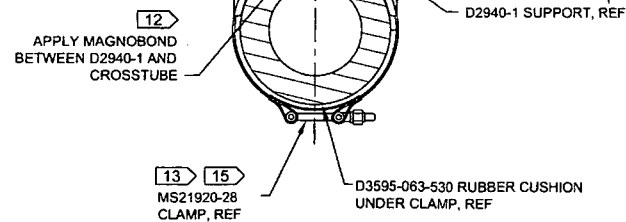
DEO ATTACHED

**RELEASED**  
2009-10-29

100165



**D212-664-241/-241B  
ASSEMBLY DETAIL**



**SECTION A-A**  
SCALE 4X

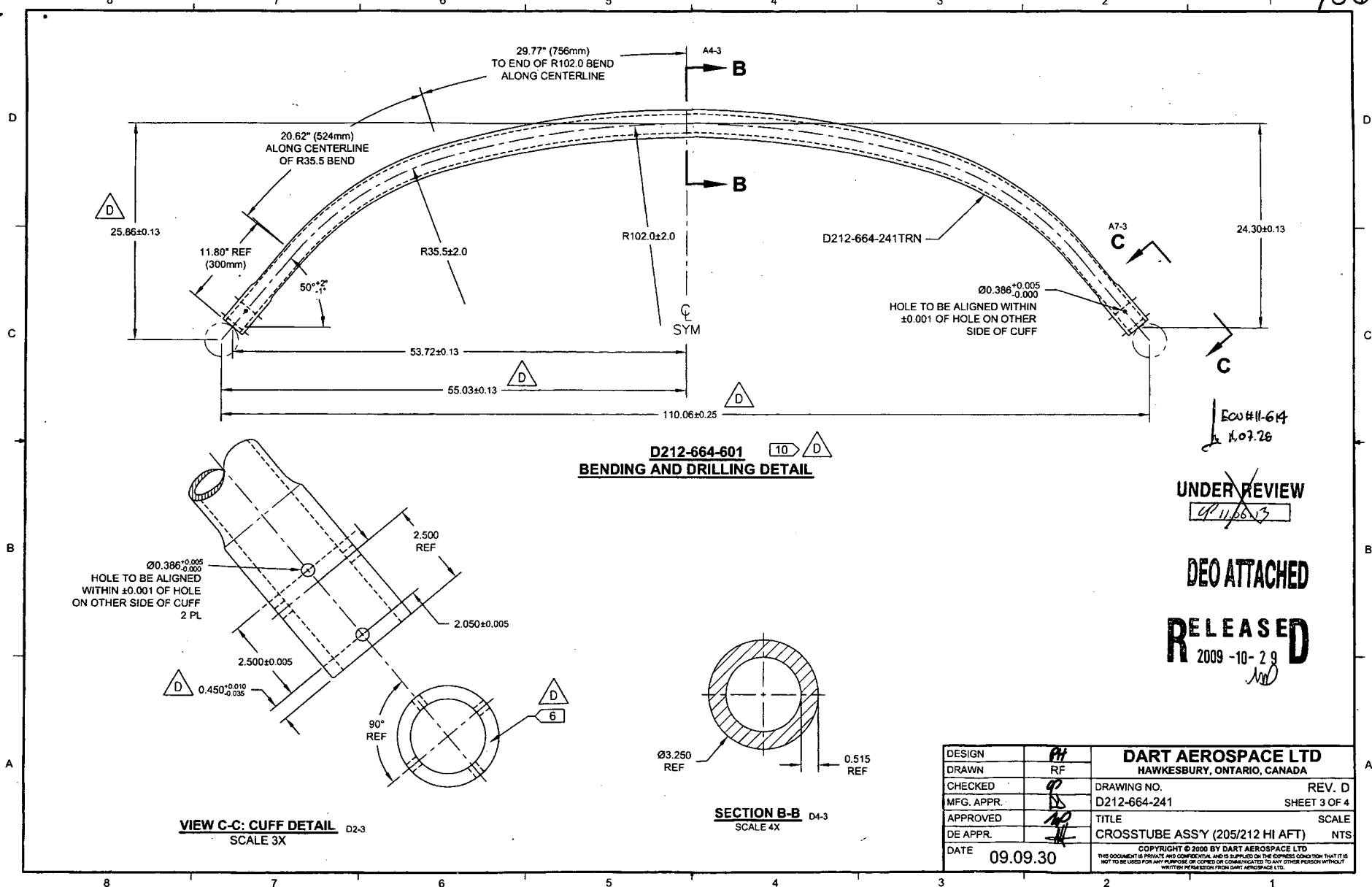
ECO #11-614  
11.07.26  
**UNDER REVIEW**  
09/10/26

**DEO ATTACHED**

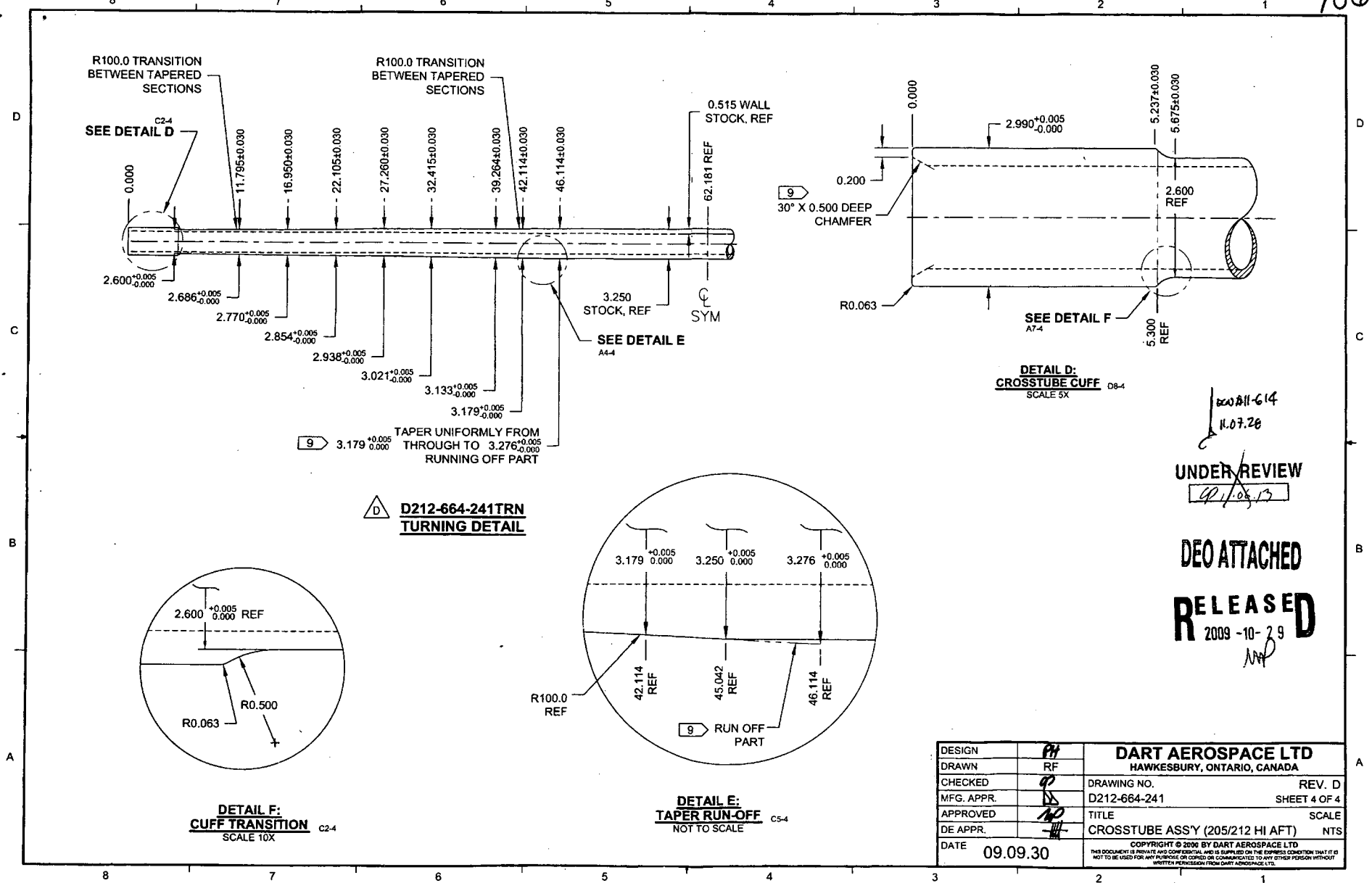
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2009-10-28

DESIGN	PH	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	JP	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-241	SHEET 2 OF 4
APPROVED	JP	TITLE	SCALE
DE APPR.	HL	CROSSTUBE ASS'Y (205/212 HI AFT)	NTS
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106165



106165



200811-614  
11.07.26  
**UNDER REVIEW**  
[Signature]  
**DEO ATTACHED**  
**RELEASED**  
2009-10-29  
[Signature]

10016-5

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASSY (205/212 HI AFT)	REV. D	<b>DART AEROSPACE LTD ENGINEERING ORDER</b>	D.E.O. NO. D212-664-241-D-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED	MFG. APPR.	APPROVED	DE APPR.		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

**PURPOSE:**

ADD AN INSPECTION WINDOW TO UNDERSIDE OF CROSSTUBE.

**CHANGE:**

NOTES 2 OF SHEET 1 IS AMENDED AS FOLLOWS:

**IS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
PAINT OUTSIDE PER DART QSI 005 4.2  
REMOVE MASKING AND APPLY CLEAR COAT

**WAS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2

RELEASED  
2011-04-18

UNDER REVIEW

11.16.13

ECN#1-614

11.07.28

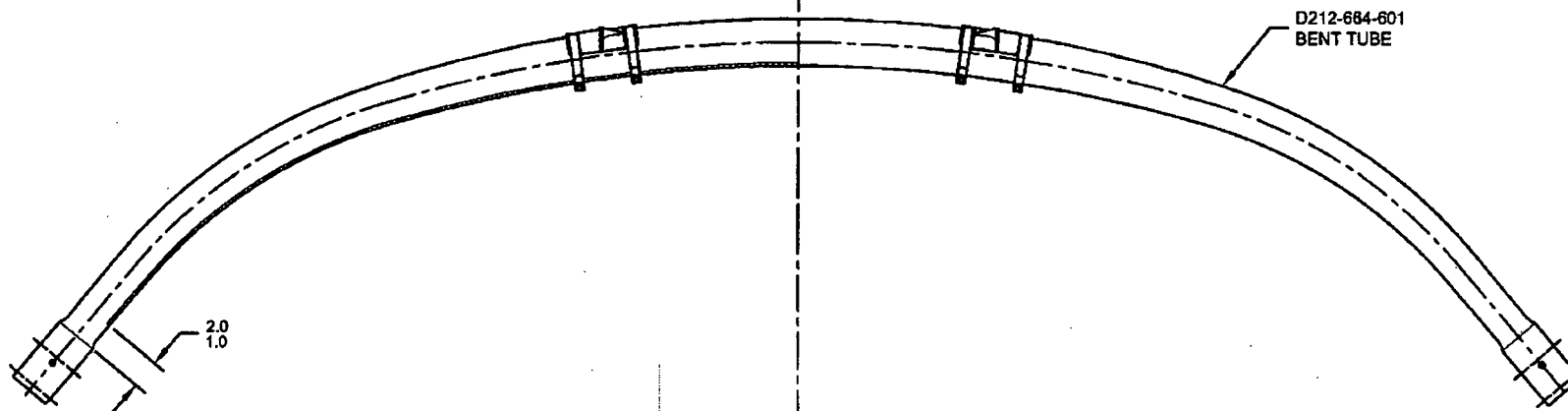


106165

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASSY (205/212 HI AFT)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-241-D-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN	CHECKED <i>JP</i>	MFG. APPR. <i>E</i>	APPROVED <i>MD</i>	DE APPR. <i>MD</i>		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

IS:

WAS:



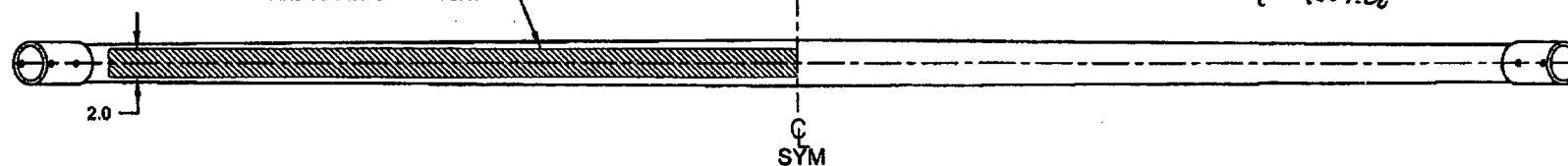
D212-664-241/-241B  
ASSEMBLY DETAIL

**RELEASED**  
2011-04-18

**UNDER REVIEW**

*JP* 11.06.13  
11.07.12

MASK AREA PRIOR TO PAINTING,  
REMOVE MASKING AFTER PAINT  
AND APPLY CLEAR COAT



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106165

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASS'Y (205/212 HI AFT)	REV. D	<b>DART AEROSPACE LTD ENGINEERING ORDER</b>		D.E.O. NO. D212-664-241-D-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN 00	CHECKED ASS	MFG. APPR. DS	APPROVED MD		DE APPR. H		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/27/21		DATE 11.07.21		

**PURPOSE:**

REPLACE MAGNOBOND WITH PROSEAL.

**CHANGE:**

IS:

Item	Qty -241	Qty -241B	Part Number	Description
7	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

12) TO INSTALL D2940-1 SUPPORT: ABRABE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.

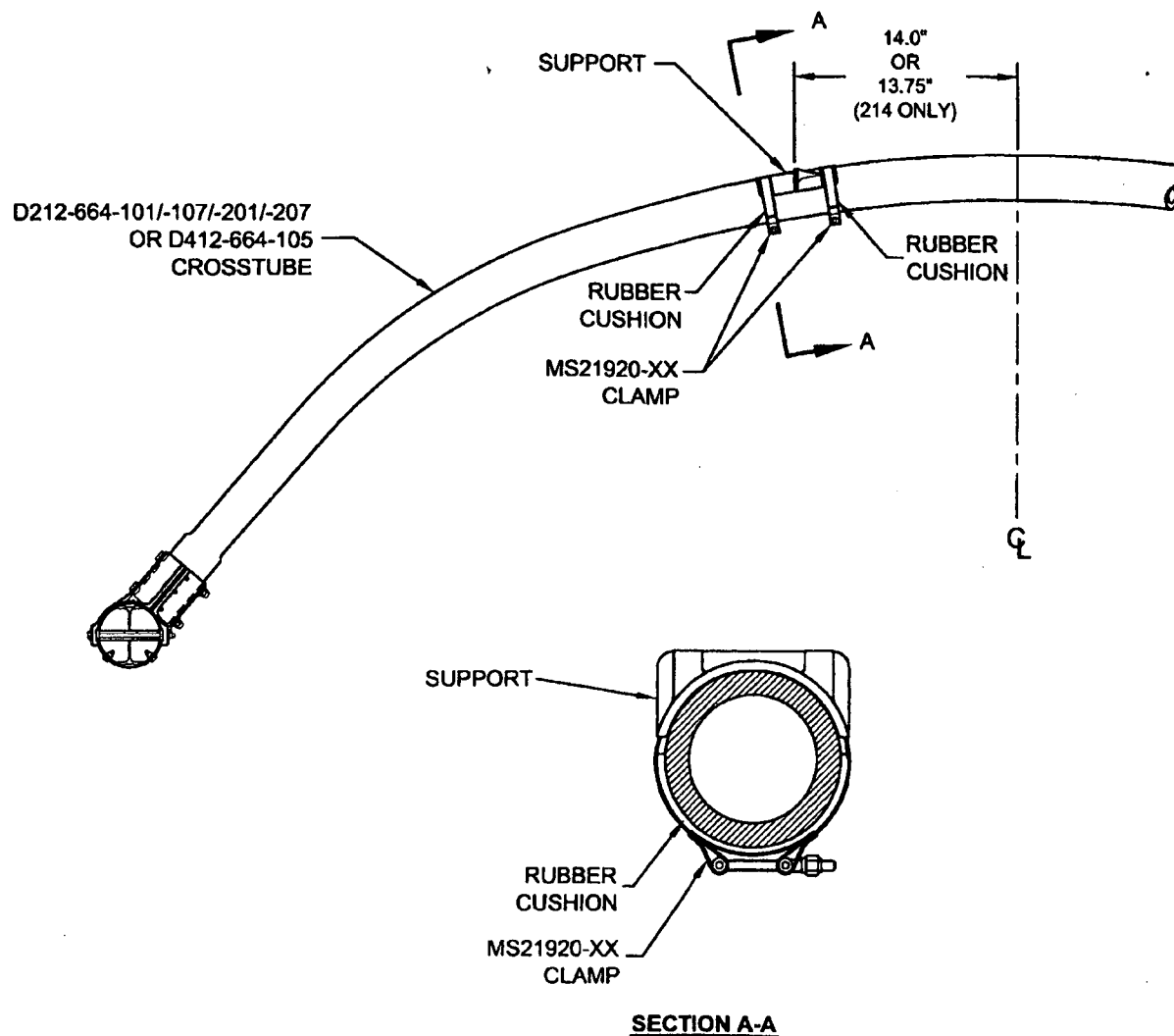
15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.

15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

**RELEASED**  
2011-07-28  
MD



**FIGURE 1: SUPPORT INSTALLATION**

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED  
BY: *[Signature]*  
D. SHEPHERD (DE # 02)  
DATE: 11.07.20  
CERT. NO.: SH01-9  
ISSUE NO.: 3

DESIGN	<i>Q</i>	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	<i>Q</i>		
CHECKED	<i>ASS</i>	DRAWING NO.	REV. B
MFG. APPR.	<i>N/A</i>	DSI 9563	SHEET 2 OF 2
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	SUPPORT INSTALLATION CHANGE	NTS
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106165

## 212-664-201 "Folio"

**Batch#:** 106165

### **Setup**

Rollers 3.25 x 3 \*\*\*\*without spacers\*\*\*...

Large Table, Shims 1.85" for SA bend, shims 1.7" for SB bend (new buggy)/adjust supporting rollers as required.

From cuffs, mark tube @ 32.1875 & **35.1875 RED** and center line

### **Middle Bend**

Start bending on 32.1875 line w/tube on **LARGE TABLE**. Approach from this line is **2775 on both Y&W**. Use programs middle auto.

**Bend middles even to reference line on reference board** in order for side programs to be effective.

3735 / 1900

### **Side bends**

Start bending on **35.1875** line with long part of tube on **LARGE TABLE**. approach of **Y 1900 W 3735**

Run programs s01-s05 without stopping, CHECK, then s06 to 16 to finish. CHECK between each program..

Approach for Prog s06 to s16 is Y 2190 and W 3735

### **CHANGED 35.187 LINE TO 34.9, did not work! DP 11-8-11**

**11/11/02** tried new tangent line today. tube was far too high. nearly scrapped. 24.75 on one side, 24.5625 on the other. max tolerance is 24.43. jw

**12/05/29** NOW USING ORIGINAL TANGENT LINES AGAIN

**12-9-13** bent one tube. used original tangent lines. ran 212aMauto. then middlesfix. tube was very close to even on both sides of middle, one a hair under the reference line, and one a hair over. from there sides were run as per folio, then 5c,6,7,8,9,10 to finish. height and span were both close to nominal.

### **Passes:**

1	M AUTO	1
2	M FIX	2
3	M FIX	3
4	M FIX 2	4
5		5
6		6
7		7
8		8
9		9
10		10
11		11
12		12
13		13
14		14
15		15
16		16

# DART SERVICE INSTRUCTION

TO AMEND INSTRUCTIONS FOR CONTINUOUS AIRWORTHINESS ICA-D212-664 Rev. 6 OR LATER

REF. CANADIAN STC: SH01-9  
REF. FAA STC: SR01298NY  
REF. EASA STC: EASA.IM.R.S.01304

## PURPOSE:

The supports on the following crosstubes are now installed using Proseal instead of Magnobond:

D212-664-101/-101B @ CHG 005  
D412-664-105 @ CHG 002  
D212-664-107/-107B @ CHG 002

D212-664-201/-201B @ CHG 005  
D212-664-207/-207B @ CHG 002

## CHANGE:

For the crosstubes listed above, section 32.4 of ICA-D212-664 is amended as follows. Use Figure 1 of this service instruction and Figures 32-2 to 32-9 of ICA-D212-664 for further reference. For crosstubes of an earlier change number, it is recommended that if the supports are removed, the supports should be reinstalled using the procedure listed below.

## 32.4 SUPPORT INSTALLATION

- 32.4.1 Locate the area on the crosstube for installation of support (see Figure 1 of this service instruction). For D212-664-101/-107/-201/-207 and D412-664-105 crosstubes, the outward face of the support tabs should be 14.0" (355mm) from the crosstube center for 204/205/210/412/UH-1 aircraft. For installation on 214B/B-1 aircraft, the outward face of the support tabs should be 13.75" (349mm). Ensure paint finish of crosstube is intact; touch up as required per Chapter 5 (5.3.9) of ICA-D212-664.
- 32.4.2 If present, remove any paint/primer on bottom of supports. Abrade mating surfaces of support and crosstube with 400-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.3 Ensure a layer of 3M Scotch-Weld 2216 B/A Epoxy Adhesive is on the bottom of the support. If required, either apply or touch-up support to have a 0.03" to 0.05" thick layer of adhesive over the entire mating surface. Allow supports to cure for 24 hours.
- 32.4.4 Abrade mating surfaces of support (after cure) and crosstube with 180-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.5 Apply a 0.04" to 0.07" thick layer of Proseal 890 Class B or AMS-S-8802 Class B sealant underneath applicable support and install support as shown in Figure 1 of this service instruction.
- 32.4.6 Install the clamps opposite to crosstube support as shown in section A-A of Figure 1. Install rubber cushions underneath each clamp around the bottom circumference of the crosstube up to the crosstube centerline. Torque clamps 80-100 in-lb (9.0-11.3 Nm). It is acceptable to use smaller or larger sized MS21920-XX clamps than those listed in ICA-D212-664, ensure that after torquing the clamps per this instruction, the nuts are in safety but not bottomed out
- 32.4.7 Prior to installing crosstube on aircraft, allow supports to cure for 72 hours and recheck torque on clamps.

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

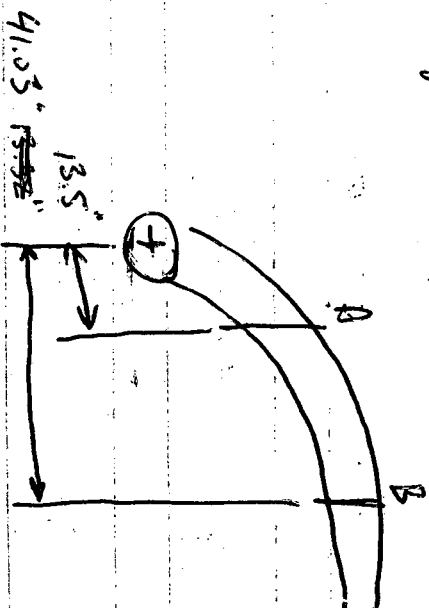
APPROVED  
BY: *[Signature]*  
D. SHEPHERD (DE # 02)  
DATE: 11.07.20  
CERT. NO.: SH01-9  
ISSUE NO.: 3

B	ADD 3M 2216 ADHESIVE TO SUPPORT	CP	11.07.15
A	NEW ISSUE	CP	11.06.14
REV.	DESCRIPTION	BY	DATE
DESIGN	<i>q</i>	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	<i>q</i>		
CHECKED	<i>ASS</i>	DRAWING NO.	REV. B
MFG. APPR.	<i>N/A</i>	DSI 9563	SHEET 1 OF 2
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	SUPPORT INSTALLATION CHANGE	NTS
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106165

CRUSHING OF DZIL-664-201

Acceptability of 8% CRUSHING



Point A:  $OD = 2.548$  in  $OD = 2.442$  in

CRUSHING  $(2.992 - 2.548) / (2.992 + 2.548) = 8\%$

$I = 1.476$  in<sup>4</sup>

Point B:  $OD = 3.25$  in  $ID = 2.22$  in

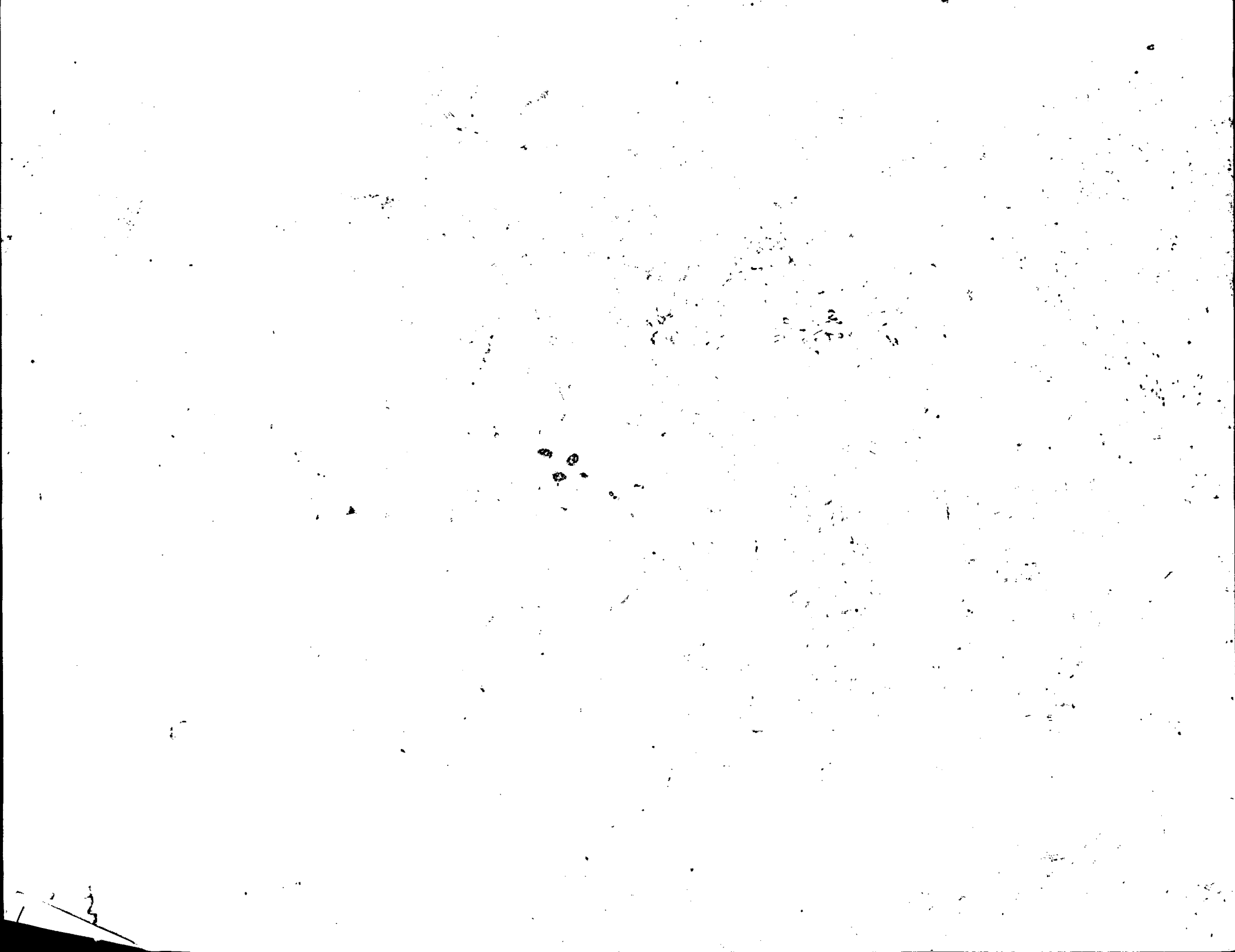
$I = 4.284$  in<sup>4</sup>

$$\begin{aligned} A: F &= MC/I = P \times 13.5 \times 2.548 / 2 \times 1.476 = 11.65 P \\ B: &= P \times 41.03 \times 2.992 / 2 \times 4.284 = 14.32 P \end{aligned}$$

$$MS = 14.32 / 11.65 - 1 = 0.22$$

The will fail at support before area of 8% CRUSHING, 8% CRUSHING AT END OF BEND IS ACCEPTABLE

P 12.022





**skyservice**  
Air travel. Evolved.

# NDT Work Order

Sky Service F.B.O. Inc.

DOT APP 53-89 / EASA 145.7142 / BDA AMO 385

WO #: YYZ

70247

Customer: DART AEROSPACE

Dept: NDTYYZ

Reference: 21819

Make:

Model:

Reg:

A/C S/N:

TSN:

CSN:

TSO:

Tail#:

Task: ☒ Scheduled ☐ Unscheduled ☐ A.O.G. ☒ P.T. ☐ M.T. ☐ E.T. ☐ U.T. ☐ R.T.

## Work Required:

CARRY OUT NDT ON THE FOLLOWING CROSSTUBES:

- ① WO ID 107715 - D212-664-101 FWD CROSSTUBE
- ② WO ID 108251 - D212-664-201 AFT CROSSTUBE
- ③ WO ID 106165 - D212-664-201 AFT CROSSTUBE
- ④ WO ID 107716 - D212-664-101 FWD CROSSTUBE

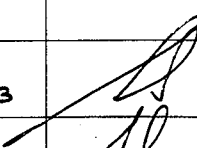

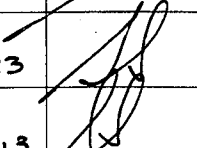

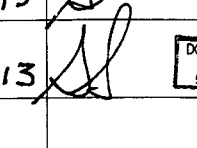

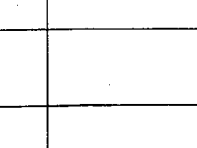

## Action Taken:

Date:

Initial/Stamp:

LIQUID PENETRANT INSPECTION CARRIED

OUT ON THE FOLLOWING CROSSTUBES

- | Action Taken                   | Date        | Initial/Stamp  |
|--------------------------------|-------------|--|
| ① WO ID 107715 No CRACKS FOUND | 24 OCT 2013 | <br> |
| ② WO ID 108251 No CRACKS FOUND | 24 OCT 2013 | <br> |
| ③ WO ID 106165 No CRACKS FOUND | 24 OCT 2013 | <br> |
| ④ WO ID 107716 No CRACKS FOUND | 24 OCT 2013 | <br> |

IAW ASTM 1417 LATEST REV.

*M/A 13.10.25*

ARDEX 970P25E Lot# D21103101

B/L # M20189

I certified that the maintenance described above has been performed with the applicable standard of airworthiness.

Signature:

Name:

GARY SMITH

ACA/SCA Stamp

Date:



24 OCT 2013



Work Order ID 106165

\*106165\*

Page 1

August-28-13 1:08:23 PM

Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Aft Crosstube - High

Start Date: 9/09/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 9/09/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Run Start \*NR1\*

Approvals: Process Plan: MLJ Date: 13-08-30

Tooling:

Date:

Stop \*NR2\*

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D212-664-241	Rev D (DEO)								
DSI9563	B								

100

0.00

\*100\*

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels as per PPP D212-664-201

CHG003

MLJ 13-11-01

110

0.00

\*110\*

Pick Kit

Packaging

Memo

0.00

Packaging

Packaging

Rm 13-10-04